

**Riceville Community School
Riceville, IA**

The Board of Education of the Riceville Community School District held their organizational board meeting November 19th 2018, at 7:30 p.m. in the High School Library. Board members present: Hale, Guertin, Keeling and Fox. Absent: Richardson. Also, in attendance: Barb Schwamman—Superintendent, Vanessa Huber-Principal, Jennifer Dunn—Board Secretary/Treasurer, Staff: Morgan Nosbisch, Che Oulman and Samantha Burke. Parents: Christopher Smith. Student: Sophia Weaver, Andrea Gronwoldt, Morgan Drilling, JD Beran, and Issac Harken.

Fox called the meeting to order @ 7:32 PM.

Motion by Guertin, seconded by Keeling to approve the agenda, with the removal of closed session. 4 Ayes. MC.

Members of the FFA spoke to the Board of Education on the National FFA Convention Trip.

Motion by Keeling, second by Guertin to approve the minutes of previous meeting and summary of bills. Ayes 4. MC.

Motion by Guertin, seconded by Hale to approve the open enrollments in from Howard -Winn. 4 Ayes. MC.

Motion by Keeling, seconded by Guertin to approve the resignations of Darcy Fair—JV Volleyball and Chelsea Fast as para/bus driver. Roll Call Vote: Hale, aye; Keeling, aye; Guertin, aye; Fox, aye. MC.

Motion by Keeling, seconded by Hale to approve Stacy O'Brien and Bethany Gorche as teacher aides. Roll Call Vote: Keeling, aye; Hale, aye; Guertin, aye; Fox, aye. MC.

Motion by Guertin, seconded by Keeling to approve Cambria Berentsen as volunteer basketball, and Erin Neimeyer as long-term sub aide. Roll Call Vote: Guertin, aye; Keeling, aye; Hale, aye; Fox, aye. MC.

Mrs. Huber spoke about, state desk audit, Charles City radio station, and Thanksgiving feast.

Superintendent Schwamman spoke about IASB Convention, IHSSA, Audit, and computer science.

Curriculum Director Leichsenring spoke to the board about Fast testing.

Motion by Hale, seconded by Keeling to approve the SBRC Application for Open Enrollment Out not in Fall 2017 in the amount of \$19,992.00. 4 Ayes. MC.

Discussion was held on Eagle Bluff field trip.

Discussion was held on portables.

Motion by Keeling, seconded by Guertin to approve the 3rd phase of Light Bids in the amount of \$18,050.00. 4 Ayes. MC.

Results of the EMT survey were given. Motion by Hale, seconded by Guertin to explore more option on the EMT classes. 4 Ayes. MC.

Motion by Hale, seconded by Guertin to approve the nurse from .8 FTE to 1.0 FTE. 4 Ayes. MC.

Motion by Hale, seconded by Keeling to approve to look at hiring an additional 1st Grade teacher. 4 Ayes. MC.

Motion by Keeling, seconded by Guertin to approve the snow removal bids from Buckwheat & Sons for the 2018-19 school year. 4 Ayes. MC.

Motion by Keeling, seconded by Hale to approve the ISL Resolution. 4 Ayes. MC.

Motion by Guertin, seconded by Hale to approve the 1st reading of board policy 102.E1. 4 Ayes. MC.

A discussion was on bank accounts.

Next board meeting will be held Monday December, 21st at 7:30 p.m. in the High School Library.

Motion by Guertin, second by Hale to adjourn the meeting @ 9:03 PM. Ayes 4. MC.

Karl Fox
Board President

Jennifer Dunn
Board Secretary

Analysis of Cash Balance Including investment CD

11/31/18

	11/31/18	11/31/17	% change	Notes *
General Fund (10)	1,114,582.80	1,402,721.00	-20.5%	PD Conferences, Additional Staff
Management Fund (22)	590,929.93	536,158.65	10.2%	
PPEL & LOSST Funds (36 & 37)	1,310,076.93	1,176,922.64	11.3%	
Activity Fund (21)	87,260.54	54,828.52	59.2%	
Hot Lunch Fund (61)	80,946.88	48,240.74	67.8%	
TOTAL	<u>3,183,797.08</u>	<u>3,218,871.55</u>	-1.1%	Appears reasonable

* = Cash balances will fluctuate with the timing of revenue and expense receipts and payments. Items considered unusual are explained in greater detail under the notes above.

Inter-fund Loan outstanding

	Receivable	Payable	Explanation
General Fund	0.00		
Management Fund		0.00	

Invoice Listing - Detail
Unposted; Batch Description Invoices-DEC 2018 BATCH 1

Batch Description: Invoices-DEC 2018 BATCH 1

Processing Month: 12/2018

Vendor ID: 100638 4 SEASONS FUND RAISING

Description:
Sequence: 1 Check Type:
Chart of Account Number Detail Description
21 0000 1400 950 7960 612 CANDY -FRUIT SALES

PO Number: Invoice Number: 05112 Amount: 1,937.80
Invoice Date: 11/28/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
1,937.80 N Final

Vendor ID: 707133 AHLERS & COONEY, P.C.

Description:
Sequence: 1 Check Type:
Chart of Account Number Detail Description
10 0000 2310 000 0000 342 LEGAL SERVICES

PO Number: Invoice Number: 755566 Amount: 846.00
Invoice Date: 11/26/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
846.00 N Final

Vendor ID: 707133 AHLERS & COONEY, P.C.

Description:
Sequence: 1 Check Type:
Chart of Account Number Detail Description
10 0000 2310 000 0000 342 LEGAL SERVICES

PO Number: Invoice Number: 756339 Amount: 762.00
Invoice Date: 11/28/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
762.00 N Final

Vendor ID: 100055 ALLIANT ENERGY

Description:
Sequence: 1 Check Type:
Chart of Account Number Detail Description
10 0000 2600 000 8270 622 BUS BARN

PO Number: Invoice Number: 20181205 Amount: 71.86
Invoice Date: 11/19/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
71.86 N Final

Vendor ID: 100445 ANDY'S MINI MART

Description:
Sequence: 1 Check Type:
Chart of Account Number Detail Description
21 0000 1400 920 0000 612 OFFICIALS MEALS

PO Number: Invoice Number: 101218 Amount: 37.47
Invoice Date: 10/12/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
37.47 N Final

Vendor ID: 100445 ANDY'S MINI MART

Description:
Sequence: 1 Check Type:
Chart of Account Number Detail Description
10 0000 2700 000 0000 626 1149.30 GAL GAS
10 0000 2700 000 0000 627 343.90 GAL DEISEL

PO Number: Invoice Number: 20181205 Amount: 3,103.73
Invoice Date: 11/30/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
2,398.50 N Final
705.23 N Final

Vendor ID: 100445 ANDY'S MINI MART

Description:
Sequence: 1 Check Type:
Chart of Account Number Detail Description
21 0000 1400 920 0000 612 OFFICIALS MEALS

PO Number: Invoice Number: 67904 Amount: 22.42
Invoice Date: 10/19/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
22.42 N Final

Vendor ID: 100445 ANDY'S MINI MART

PO Number: Invoice Number: 75851 Amount: 70.01

Invoice Listing - Detail
Unposted; Batch Description Invoices-DEC 2018 BATCH 1

Description:		Invoice Date: 11/28/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
21 0000 1400 950 7960 612	FFA MEETING PIZZA		70.01		N	Final
Vendor ID: 101157		APPLE COMPUTER, INC.		PO Number: 20030T	Invoice Number: 6774842497	Amount: 1,329.00
Description:		Invoice Date: 11/27/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
36 0000 2310 000 0000 734	25 PACK MAG SAFE 2 POWER ADAPTER		1,250.00		N	Final
36 0000 2310 000 0000 734	DUCK HEAD ADAPTER		79.00		N	Final
Vendor ID: 101157		APPLE COMPUTER, INC.		PO Number: 20030T	Invoice Number: 6774842498	Amount: 250.00
Description:		Invoice Date: 11/27/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
36 0000 2310 000 0000 734	5 PACK MAG SAFE POWER ADAPTER		250.00		N	Final
Vendor ID: 103071		BARTELS, RICK		PO Number:	Invoice Number: 20181205	Amount: 92.00
Description:		Invoice Date: 12/05/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 92.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 0000 2700 000 0000 271	PHYSICAL REIMB		92.00	92.00	N	Final
Vendor ID: 105475		BETHKE, MATT		PO Number:	Invoice Number: 20181205	Amount: 100.00
Description:		Invoice Date: 11/30/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 100.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
21 0000 1400 920 6710 345	OFFICIAL		50.00	50.00	N	Final
21 0000 1400 920 6810 345	OFFICIAL		50.00	50.00	N	Final
Vendor ID: 707427		BRAIN INJURY ALLIANCE		PO Number:	Invoice Number: 20181205	Amount: 150.00
Description:		Invoice Date: 12/05/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 3200 1100 100 0000 810	ASSEMBLY		150.00		N	
Vendor ID: 706739		BRUNNER, AMANDA		PO Number:	Invoice Number: 20181205	Amount: 70.00
Description:		Invoice Date: 11/30/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 70.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 0000 2700 000 0000 271	PHYSICAL REIMB		70.00	70.00	N	Final
Vendor ID: 105063		BRUNNER, MIKE		PO Number:	Invoice Number: 20181205	Amount: 70.00
Description:		Invoice Date: 11/30/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	

Invoice Listing - Detail

Unposted; Batch Description Invoices-DEC 2018 BATCH 1

Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:			
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
10 0000 2700 000 0000 271	PHYSICAL REIMB		70.00		N	Final	
Vendor ID: 102432 CAROLINA BIOLOGICAL SUPPLY CO.							
Description:		PO Number: 20217E	Invoice Number: 50482203 RI		Amount:	281.94	
Sequence: 1	Check Type:	Checking Account ID:	Invoice Date: 11/15/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	Check Number:	Check Date:			
10 2000 1100 100 0000 612	FISH & ONION MITOSIS MICROSCOPE		<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
	SLIPE &		23.75		N	Final	
10 2000 1100 100 0000 612	TYPICAL ANIMAL AND PLANT CELLS		23.27		N	Final	
	MICROSCOP						
10 2000 1100 100 0000 612	FROG ANATOMY KIT W/ DISSECTING SET		212.80		N	Final	
10 2000 1100 100 0000 612	SHIPPING		22.12		N	Final	
Vendor ID: 706993 CHANCELLOR, MARTHA							
Description:		PO Number:	Invoice Number: 20181205		Amount:	400.00	
Sequence: 1	Check Type:	Checking Account ID:	Invoice Date: 11/30/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	Check Number:	Check Date:			
10 3200 2222 100 0000 320	LIBRARIAN		<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
			400.00		N	Final	
Vendor ID: 101109 CHARLES CITY COMM SCHOOL							
Description:		PO Number:	Invoice Number: 20181205		Amount:	143.00	
Sequence: 1	Check Type:	Checking Account ID:	Invoice Date: 11/30/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	Check Number:	Check Date:			
10 0000 1000 100 3761 612	IBN EXPENSES-SPEAKER		<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
			143.00		N	Final	
Vendor ID: 100196 CITY OF RICEVILLE							
Description:		PO Number:	Invoice Number: 25385		Amount:	642.80	
Sequence: 1	Check Type:	Checking Account ID:	Invoice Date: 11/20/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	Check Number:	Check Date:			
10 0000 2600 000 0000 411	WATER		<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
			176.40		N	Final	
10 0000 2600 000 0000 421	GARBAGE		290.00		N	Final	
10 0000 2600 000 0000 411	SEWER		176.40		N	Final	
Vendor ID: 100196 CITY OF RICEVILLE							
Description:		PO Number:	Invoice Number: 25386		Amount:	28.36	
Sequence: 1	Check Type:	Checking Account ID:	Invoice Date: 11/20/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	Check Number:	Check Date:			
10 0000 2600 000 0000 411	SEWER		<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
			14.18		N	Final	
10 0000 2600 000 0000 411	WATER		14.18		N	Final	
Vendor ID: 100196 CITY OF RICEVILLE							
Description:		PO Number:	Invoice Number: 25387		Amount:	28.76	
Sequence: 1	Check Type:	Checking Account ID:	Invoice Date: 11/20/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	
			Check Number:	Check Date:			

Invoice Listing - Detail
Unposted; Batch Description Invoices-DEC 2018 BATCH 1

<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 0000 2600 000 0000 411	WATER		14.38		N	Final
10 0000 2600 000 0000 411	SEWER		14.38		N	Final

Vendor ID: 100639 COMMUNITY ORCHARD

Description:
Sequence: 1 Check Type: Checking Account ID:
Chart of Account Number Detail Description
21 0000 1400 950 7960 612 APPLE CIDER-FRUIT SALES

PO Number: Invoice Number: 2378 Amount: 791.20
Invoice Date: 11/27/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
791.20 N Final

Vendor ID: 707111 CSI LEASING

Description:
Sequence: 1 Check Type: Checking Account ID:
Chart of Account Number Detail Description
33 0000 6240 000 0000 910 1:1 COMPUTER PAYMENT

PO Number: Invoice Number: RT00212546 Amount: 39,401.75
Invoice Date: 11/22/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
39,401.75 N Final

Vendor ID: 100050 DECKER SPORTING GOODS

Description:
Sequence: 1 Check Type: Checking Account ID:
Chart of Account Number Detail Description
21 0000 1400 926 6730 612 BASEBALL HATS

PO Number: Invoice Number: AAQ007802-AJ01 Amount: 204.50
Invoice Date: 11/01/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
204.50 N Final

Vendor ID: 100050 DECKER SPORTING GOODS

Description:
Sequence: 1 Check Type: Checking Account ID:
Chart of Account Number Detail Description
21 0000 1400 926 6730 612 BASEBALL HATS

PO Number: Invoice Number: AAQ007803-AJ01 Amount: 252.50
Invoice Date: 11/06/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
252.50 N Final

Vendor ID: 100745 DECORAH COMMUNITY SCHOOL DIST

Description:
Sequence: 1 Check Type: Checking Account ID:
Chart of Account Number Detail Description
21 0000 1400 920 6710 815 ENTRY FEE

PO Number: Invoice Number: 20181205 Amount: 80.00
Invoice Date: 12/05/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
80.00 N Final

Vendor ID: 100745 DECORAH COMMUNITY SCHOOL DIST

Description:
Sequence: 1 Check Type: Checking Account ID:
Chart of Account Number Detail Description
10 0000 1100 100 0000 567 OPEN ENROLLMENT
10 0000 1100 100 3116 567 TLC OPEN ENROLLMENT

PO Number: Invoice Number: 20181205-0001 Amount: 3,493.64
Invoice Date: 11/30/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
3,332.00 N Final
161.64 N Final

Vendor ID: 100158 DEMCO

Description:
Sequence: 1 Check Type: Checking Account ID:
Chart of Account Number Detail Description

PO Number: 20208L Invoice Number: 6499010 Amount: 820.24
Invoice Date: 11/20/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00
Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full

Invoice Listing - Detail
Unposted; Batch Description Invoices-DEC 2018 BATCH 1

10 0000 2222 100 8953 643 CHARGING STATION

820.24 N Final

Vendor ID: 707328

DINGMAN, HUNTER

PO Number: Invoice Number: 20181205 Amount: 100.00

Description: Invoice Date: 11/20/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 100.00

Sequence: 1 Check Type: Checking Account ID:

Chart of Account Number Detail Description

21 0000 1400 920 6810 345 OFFICIAL

21 0000 1400 920 6710 345 OFFICIAL

Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
50.00 50.00 N Final
50.00 50.00 N Final

Vendor ID: 706884

EARTHGRAINS BAKING CO, INC

PO Number: Invoice Number: 5225192245 Amount: 131.30

Description: Invoice Date: 11/16/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00

Sequence: 1 Check Type: Checking Account ID:

Chart of Account Number Detail Description

61 0000 3110 000 0000 631 BREAD

Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
131.30 N Final

Vendor ID: 706958

EMS DETERGENT SERVICES

PO Number: Invoice Number: 0611191801 Amount: 510.48

Description: Invoice Date: 11/19/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00

Sequence: 1 Check Type: Checking Account ID:

Chart of Account Number Detail Description

61 0000 3110 000 0000 618 DETERGENT

Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
510.48 N Final

Vendor ID: 102903

EVANS PRINTING & PUBLISHING

PO Number: Invoice Number: 6213 Amount: 141.04

Description: Invoice Date: 11/30/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00

Sequence: 1 Check Type: Checking Account ID:

Chart of Account Number Detail Description

10 0000 2310 000 0000 613 LEGAL PUBLICATIONS

Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
141.04 N Final

Vendor ID: 102665

FLOYD-MITCHELL CO. SOLID WASTE

PO Number: Invoice Number: 02-00170450 Amount: 32.50

Description: Invoice Date: 11/19/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00

Sequence: 1 Check Type: Checking Account ID:

Chart of Account Number Detail Description

10 0000 2600 000 0000 421 LANDFILL CHARGES--PAINT DISPOSAL

Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
32.50 N Final

Vendor ID: 707270

GILLETTE GROUP

PO Number: Invoice Number: 9238796 Amount: 93.42

Description: Invoice Date: 11/15/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00

Sequence: 1 Check Type: Checking Account ID:

Chart of Account Number Detail Description

21 0000 1400 950 7960 612 VENDING MACHINE SUPPLIES

Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
93.42 N Final

Vendor ID: 707270

GILLETTE GROUP

PO Number: Invoice Number: 9238797 Amount: 52.66

Description: Invoice Date: 11/15/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00

Sequence: 1 Check Type: Checking Account ID:

Chart of Account Number Detail Description

10 0000 1100 100 8031 618 HS LOUNGE POP

Check Number: Check Date:
Cost Center ID Detail Amount 1099 Detail Amount Asset/Asset Tag In Full
52.66 N Final

Invoice Listing - Detail
Unposted; Batch Description Invoices-DEC 2018 BATCH 1

Vendor ID: 707270		GILLETTE GROUP	PO Number:	Invoice Number: 9239249	Amount:	78.99
Description:			Invoice Date: 11/29/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 0000 1100 100 8031 618	ELEM LOUNGE POP		78.99		N	Final
Vendor ID: 707270		GILLETTE GROUP	PO Number:	Invoice Number: 9239250	Amount:	26.33
Description:			Invoice Date: 11/29/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 0000 1100 100 8031 618	HS LOUNGE POP		26.33		N	Final
Vendor ID: 100284		HOWARD WINNESHIEK COM SCHOOL	PO Number:	Invoice Number: 20181205	Amount:	38,432.19
Description:			Invoice Date: 11/26/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 0000 1100 100 0000 567	OPEN ENROLLMENT		36,652.00		N	Final
10 0000 1100 100 3116 567	TLC OPEN ENROLLMENT		1,780.19		N	Final
Vendor ID: 104161		JOSTENS, INC	PO Number:	Invoice Number: 20181205	Amount:	936.00
Description:			Invoice Date: 12/05/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
21 0000 1400 950 7950 612	1ST YEARBOOK PYMT		936.00		N	Final
Vendor ID: 707404		MAIN STREET MARKET PLACE	PO Number:	Invoice Number: 00513808	Amount:	103.64
Description:			Invoice Date: 11/27/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 3200 1300 355 0000 612	FACS FOOD SUPPLIES		103.64		N	Final
Vendor ID: 707404		MAIN STREET MARKET PLACE	PO Number:	Invoice Number: 00520567	Amount:	19.70
Description:			Invoice Date: 11/27/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 3200 1300 355 0000 612	FACS FOOD SUPPLIES		19.70		N	Final
Vendor ID: 707404		MAIN STREET MARKET PLACE	PO Number:	Invoice Number: 00520623	Amount:	61.18
Description:			Invoice Date: 11/27/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:		
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 3200 1300 355 0000 612	FACS FOOD SUPPLIES		61.18		N	Final
Vendor ID: 706920		MARCO	PO Number:	Invoice Number: INV5774336	Amount:	4,404.29
Description:			Invoice Date: 11/16/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00

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Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>		
10 0000 2600 000 0000 442	COPIES-OVERAGE		4,404.29		N	Final		
Vendor ID: 707134	MARCO INC.		PO Number:	Invoice Number: 61537080	Amount:			1,517.41
Description:			Invoice Date: 11/24/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>		
36 0000 2600 000 0000 442	COPIER LEASE		1,517.41		N	Final		
Vendor ID: 100007	MARTIN BROS DIST		PO Number:	Invoice Number: 7550271.	Amount:			(81.44)
Description:			Invoice Date: 11/12/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>		
61 0000 3110 000 0000 631	CREDIT		(81.44)		N	Final		
Vendor ID: 100007	MARTIN BROS DIST		PO Number:	Invoice Number: 7573723	Amount:			95.30
Description:			Invoice Date: 11/19/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>		
10 3200 1300 355 0000 612	FACS FOOD SUPPLIES		95.30		N	Final		
Vendor ID: 100007	MARTIN BROS DIST		PO Number:	Invoice Number: 7583530	Amount:			1,056.38
Description:			Invoice Date: 11/26/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>		
61 0000 3110 000 0000 618	FS SUPPLIES		81.89		N	Final		
61 0000 3110 000 0000 631	FOOD		974.49		N	Final		
Vendor ID: 100007	MARTIN BROS DIST		PO Number:	Invoice Number: 7583531	Amount:			0.12
Description:			Invoice Date: 11/26/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>		
10 0000 2600 000 0000 680	DISPENSER TOWELS		0.12		N	Final		
Vendor ID: 100007	MARTIN BROS DIST		PO Number:	Invoice Number: 7596249	Amount:			1,525.03
Description:			Invoice Date: 12/03/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>		
61 0000 3110 000 0000 618	FS SUPPLIES		132.78		N	Final		
61 0000 3110 000 0000 631	FOOD		1,392.25		N	Final		
Vendor ID: 707424	MCELROY, MISSY		PO Number:	Invoice Number: 20181205	Amount:			75.00
Description:			Invoice Date: 11/27/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:				

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<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
21 0000 1400 920 6710 345	OFFICIAL		75.00		N	Final
Vendor ID: 707425	MILLER, JOHN					
Description:		PO Number:		Invoice Number: 20181205		Amount:
Sequence: 1	Check Type:	Invoice Date: 11/20/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	75.00
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:		
21 0000 1400 920 6710 345	OFFICIAL					
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
21 0000 1400 920 6710 345	OFFICIAL		75.00		N	Final
Vendor ID: 100485	MINNTEX CITRUS					
Description:		PO Number:		Invoice Number: 20181205		Amount:
Sequence: 1	Check Type:	Invoice Date: 11/27/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	15,491.92
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:		
21 0000 1400 950 7960 616	FRUIT-FRUIT SALES					
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
21 0000 1400 950 7960 616	FRUIT-FRUIT SALES		15,491.92		N	Final
Vendor ID: 707282	MN CLAY					
Description:		PO Number: 20214H		Invoice Number: 107455		Amount:
Sequence: 1	Check Type:	Invoice Date: 12/05/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	97.50
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:		
10 3200 1100 102 8974 612	SEE QUOTE # 16244					
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 3200 1100 102 8974 612	SEE QUOTE # 16244		97.50		N	Final
Vendor ID: 105523	MOHAWK ELECTRIC					
Description:		PO Number:		Invoice Number: 5190		Amount:
Sequence: 1	Check Type:	Invoice Date: 11/08/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	161.55
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:		
10 0000 2600 000 0000 424	LP TANK REPAIR					
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 0000 2600 000 0000 424	LP TANK REPAIR		161.55		N	Final
Vendor ID: 102291	NAPA					
Description:		PO Number:		Invoice Number: 234395		Amount:
Sequence: 1	Check Type:	Invoice Date: 11/15/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	11.96
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:		
10 0000 2700 000 0000 618	SILICONE					
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 0000 2700 000 0000 618	SILICONE		11.96		N	Final
Vendor ID: 102291	NAPA					
Description:		PO Number:		Invoice Number: 234439		Amount:
Sequence: 1	Check Type:	Invoice Date: 11/16/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	4.36
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:		
10 0000 2700 000 0000 618	CIRCUIT BREAKER					
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 0000 2700 000 0000 618	CIRCUIT BREAKER		4.36		N	Final
Vendor ID: 102291	NAPA					
Description:		PO Number:		Invoice Number: 234785		Amount:
Sequence: 1	Check Type:	Invoice Date: 11/27/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00	8.56
<u>Chart of Account Number</u>	<u>Detail Description</u>	Checking Account ID:	Check Number:	Check Date:		
10 0000 2600 000 0000 680	BELT					
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>
10 0000 2600 000 0000 680	BELT		8.56		N	Final

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Vendor ID: 707423	NEIMEYER, ERIN	PO Number:	Invoice Number: 20181205	Amount:	5.12
Description:		Invoice Date: 11/28/2018	Due Date: 12/05/2018 Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 0000 2700 000 0000 618	2.30 GAL GAS		5.12		N
					In Full
					Final
Vendor ID: 103930	NORTHEAST IOWA COMM ACTION	PO Number:	Invoice Number: 20181205	Amount:	3,128.00
Description:		Invoice Date: 11/27/2018	Due Date: 12/05/2018 Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 0000 2700 217 3303 172	SP ED TRANSPORTATION		3,128.00		N
					In Full
					Final
Vendor ID: 707339	NUEHRING, CALEB	PO Number:	Invoice Number: 20181205	Amount:	100.00
Description:		Invoice Date: 11/20/2018	Due Date: 12/05/2018 Status: A	1099 Amount: 100.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6710 345	OFFICIAL		50.00	50.00	N
21 0000 1400 920 6810 345	OFFICIAL		50.00	50.00	N
					In Full
					Final
Vendor ID: 100051	OMNITEL COMMUNICATIONS	PO Number:	Invoice Number: 20181205	Amount:	1,686.58
Description:		Invoice Date: 12/01/2018	Due Date: 12/05/2018 Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 0000 2320 000 0000 532	TELEPHONE		376.58		N
10 0000 2320 000 0000 538	INTERNET		1,310.00		N
					In Full
					Final
Vendor ID: 707070	PAPPAS, NICHOLAS	PO Number:	Invoice Number: 20181205	Amount:	75.00
Description:		Invoice Date: 11/27/2018	Due Date: 12/05/2018 Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6710 345	OFFICIAL		75.00		N
					In Full
					Final
Vendor ID: 707070	PAPPAS, NICHOLAS	PO Number:	Invoice Number: 20181205-0001	Amount:	70.00
Description:		Invoice Date: 11/30/2018	Due Date: 12/05/2018 Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6710 345	OFFICIAL		70.00		N
					In Full
					Final
Vendor ID: 707070	PAPPAS, NICHOLAS	PO Number:	Invoice Number: 20181205-0002	Amount:	75.00
Description:		Invoice Date: 11/16/2018	Due Date: 12/05/2018 Status: A	1099 Amount: 0.00	
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6710 345	OFFICIAL		75.00		N
					In Full
					Final
Vendor ID: 707266	PETE, HEIDI	PO Number:	Invoice Number: 20181205	Amount:	621.92

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Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:			
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
21 0000 1400 920 6810 345	OFFICIAL		50.00		50.00 N	Final	
21 0000 1400 920 6710 345	OFFICIAL		50.00		50.00 N	Final	
Vendor ID: 706777	TIMBERLINE BILLING SERVICE LLC	PO Number:	Invoice Number: 15502	Amount:	61.74		
Description:		Invoice Date: 11/30/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:			
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
10 0000 2510 217 3303 351	MEDICAID BILLING		61.74		N	Final	
Vendor ID: 100004	TRUE VALUE	PO Number:	Invoice Number: A144762	Amount:	12.07		
Description:		Invoice Date: 11/26/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:			
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
10 0000 2600 000 0000 680	PIPING		12.07		N	Final	
Vendor ID: 100004	TRUE VALUE	PO Number:	Invoice Number: A144804	Amount:	7.20		
Description:		Invoice Date: 11/27/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:			
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
10 0000 2600 000 0000 680	PEX PIPING		7.20		N	Final	
Vendor ID: 100004	TRUE VALUE	PO Number:	Invoice Number: A144904	Amount:	0.55		
Description:		Invoice Date: 11/29/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:			
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
10 0000 2600 000 0000 680	SCREWS		0.55		N	Final	
Vendor ID: 100004	TRUE VALUE	PO Number:	Invoice Number: A144991	Amount:	1.59		
Description:		Invoice Date: 11/30/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:			
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
10 0000 2600 000 0000 680	KEY DUPLICATES		1.59		N	Final	
Vendor ID: 100004	TRUE VALUE	PO Number:	Invoice Number: A145103	Amount:	8.99		
Description:		Invoice Date: 12/04/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:			
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	
10 3200 1300 315 0000 612	BLADE COVERS		8.99		N	Final	
Vendor ID: 100004	TRUE VALUE	PO Number:	Invoice Number: B139050.	Amount:	(0.20)		
Description:		Invoice Date: 11/02/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00		
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:			
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>	<u>In Full</u>	

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10 0000 2600 000 0000 680	CREDIT	(0.20)	N	Final	
Vendor ID: 100004	TRUE VALUE	PO Number:	Invoice Number: B139827	Amount:	6.36
Description:		Invoice Date: 11/21/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 0000 2600 000 0000 680	KEY DUPLICATES		6.36	N	In Full
					Final
Vendor ID: 100004	TRUE VALUE	PO Number:	Invoice Number: B140098	Amount:	5.49
Description:		Invoice Date: 11/28/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 0000 2600 000 0000 680	SUPER GLUE		5.49	N	In Full
					Final
Vendor ID: 100004	TRUE VALUE	PO Number:	Invoice Number: B140142	Amount:	2.96
Description:		Invoice Date: 11/29/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 0000 2600 000 0000 680	SCREWS		2.96	N	In Full
					Final
Vendor ID: 100004	TRUE VALUE	PO Number:	Invoice Number: B140323	Amount:	32.90
Description:		Invoice Date: 12/03/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
10 3200 1300 315 8958 612	CUTT WHEEL		32.90	N	In Full
					Final
Vendor ID: 103898	WAPSI VALLEY CSD	PO Number:	Invoice Number: 20181205	Amount:	100.00
Description:		Invoice Date: 12/03/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 920 6790 815	WRESTLING ENTRY FEE		100.00	N	In Full
					Final
Vendor ID: 102190	WEST MUSIC COMPANY	PO Number:	Invoice Number: SI1686979	Amount:	72.50
Description:		Invoice Date: 11/16/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 910 6220 612	BARITONE REPAIR		72.50	N	In Full
					Final
Vendor ID: 102190	WEST MUSIC COMPANY	PO Number:	Invoice Number: SI1690981	Amount:	25.00
Description:		Invoice Date: 11/28/2018	Due Date: 12/05/2018	Status: A	1099 Amount: 0.00
Sequence: 1	Check Type:	Checking Account ID:	Check Number:	Check Date:	
<u>Chart of Account Number</u>	<u>Detail Description</u>	<u>Cost Center ID</u>	<u>Detail Amount</u>	<u>1099 Detail Amount</u>	<u>Asset/Asset Tag</u>
21 0000 1400 910 6220 612	ALTO SAX REPAIR		25.00	N	In Full
					Final
Vendor ID: 102190	WEST MUSIC COMPANY	PO Number:	Invoice Number: SI1691445	Amount:	62.95

Invoice Listing - Detail
Unposted; Batch Description Invoices-DEC 2018 BATCH 1

Description:

Sequence: 1

Check Type:

Checking Account ID:

Invoice Date: 11/28/2018 Due Date: 12/05/2018 Status: A 1099 Amount: 0.00

Check Number:

Check Date:

Chart of Account Number

Detail Description

Cost Center ID

Detail Amount

1099 Detail Amount

Asset/Asset Tag

In Full

21 0000 1400 910 6210 612

DORIAN MUSIC

62.95

N

Final

Batch 1099 Total: 762.00

Batch Total: 138,436.07

Report 1099 Total: 762.00

Report Total: 138,436.07

Invoice Listing - Detail

Batch Description: Invoices--DECEMBER 2018 BATCH 2

Processing Month: 12/2018

Vendor ID: 100007

MARTIN BROS DIST

Description:

Sequence: 1

Check Type:

Chart of Account Number

10 0000 1100 100 8031 618

Detail Description

CAKE PANS

Checking Account ID:

PO Number:

Invoice Date: 12/14/2018

Due Date: 12/14/2018

Status: A

1099 Amount: 0.00

Amount: 295.32

Check Number:

Check Date:

Cost Center ID

Detail Amount

1099 Detail Amount

Asset/Asset Tag

In Full

295.32

N

Batch 1099 Total: 0.00

Batch Total: 295.32

Report 1099 Total: 0.00

Report Total: 295.32

AGENDA ITEM

RICEVILLE COMMUNITY SCHOOL DISTRICT

Instructional Support Levy

Hearing on the Proposed Resolution

Resolution to Continue Participation in the Instructional Support Program

**NOTICE MUST BE GIVEN PURSUANT TO IOWA CODE
CHAPTER 21 AND THE LOCAL RULES OF THE SCHOOL
DISTRICT.**

December 17, 2018

The Board of Directors of the Riceville Community School District, in the Counties of Howard and Mitchell, State of Iowa, met in _____ session, in the High School Library, 912 Woodland Avenue, Riceville, Iowa 50466, at 7:30 o'clock P.M., on the above date. There were present President _____, in the chair, and the following named Board Members:

Absent: _____

* * * * *

The President announced that this is the time, place and date to hold a hearing on the proposed Resolution to Consider Continued Participation in the Instructional Support Program. The following persons appeared:

(List the persons who appeared or attach the minutes of the hearing)

The President declared the hearing closed.

Director _____ introduced the following Resolution and moved its adoption. Director _____ seconded the motion to adopt. The roll was called and the vote was:

AYES: _____

NAYS: _____

The President declared the Resolution adopted as follows:

RESOLUTION TO CONTINUE PARTICIPATION IN THE
INSTRUCTIONAL SUPPORT PROGRAM

WHEREAS, the Board of Directors has determined that to continue the current level of services and to fund the ongoing programs of the School District, continuation of participation in the Instructional Support Program for a period of five years is necessary and in the best interests of the District and its residents and students; and

WHEREAS, the Board of Directors has given consideration to continue participation in the Instructional Support Program as provided in Iowa Code sections 257.18 through 257.21; and

WHEREAS, the Board has published notice of the time and place of a public hearing on the Resolution; and

WHEREAS, a hearing has been held upon the proposal to continue participation in the Instructional Support Program and any objections are overruled:

NOW, THEREFORE, IT IS RESOLVED:

1. The Board of Directors determines that it is consistent with the five-year finance plan to fund the ongoing programs and services of the School District and it is in the best interest of the School District to continue participation in an Instructional Support Program as provided in Iowa Code sections 257.18 through 257.21, and to provide additional funding therefor for a period of five (5) years commencing with the fiscal year ending June 30, 2020.

2. The additional funding for the Instructional Support Program for a budget year will be determined annually, and will not exceed ten percent (10%) of the total regular program district cost for the budget year and moneys received under Iowa Code section 257.14 as a budget adjustment for the budget year.

3. Moneys received by the District for the Instructional Support Program may be used for any general fund purpose.

4. The Instructional Support Program shall be funded by instructional support state aid and a combination instructional support property tax levied annually upon the taxable property within the School District commencing with the levy of property taxes for collection in the fiscal year ending June 30, 2020, and an instructional support income surtax imposed annually, the percent of income surtax to be determined by the Board for each budget year to be imposed upon the state individual income tax of each individual income taxpayer resident in the School District on December 31, 2019, and each year thereafter.

5. Unless, within twenty-eight days following the adoption of this Resolution, the Secretary of the Board receives a petition containing the signatures of eligible electors equal in number to not less than one hundred or thirty percent of the number of voters at the last preceding regular school election, whichever is greater, asking that an election be called to approve or disapprove this action of the Board adopting the Instructional Support Program, this action of the Board is final and the Secretary is authorized and directed to certify a copy of this Resolution to the Department of Management.

In the event a petition containing the required number of signatures is filed with the Secretary of the Board within twenty-eight days of the adoption of this Resolution, the President shall call a meeting of the Board to consider rescission of this Resolution, or to direct the county commissioner of elections to submit the following question to the qualified electors of the School District at a special election.

If the Board determines to submit the question to the electors, the proposition to be submitted shall be as follows:

Shall the Board of Directors of the Riceville Community School District, in the Counties of Howard and Mitchell, State of Iowa, be authorized for a period of five (5) years to continue to levy and impose an instructional support tax in an amount (after taking into consideration instructional support state aid) of not exceeding ten percent (10%) of the total of regular program district cost for the budget year and moneys received under Iowa Code section 257.14

as a budget adjustment in the budget year, and be authorized annually, in combination, as determined by the Board, to levy an instructional support property tax upon all the taxable property within the School District commencing with the levy of property taxes for collection in the fiscal year ending June 30, 2020, and to impose an instructional support income surtax upon the state individual income tax of each individual income taxpayer resident in the School District on December 31 for each calendar year commencing with calendar year 2019, or each year thereafter, the percent of income surtax to be determined by the Board for each fiscal year, to be used for any general fund purpose?

PASSED AND APPROVED this 17th day of December, 2018.

President

ATTEST:

Secretary

CERTIFICATE

STATE OF IOWA

)

) SS

COUNTY OF HOWARD

)

I, the undersigned Secretary of the Board of Directors of the Riceville Community School District, in the Counties of Howard and Mitchell, State of Iowa, do hereby certify that attached is a true and complete copy of the portion of the corporate records of the School District showing proceedings of the Board, and the same is a true and complete copy of the action taken by the Board with respect to the matter at the meeting held on the date indicated in the attachment, which proceedings remain in full force and effect, and have not been amended or rescinded in any way; that the meeting and all action was duly and publicly held in accordance with a notice of meeting and a tentative agenda, a copy of which was timely served on each member of the Board and posted on a bulletin board or other prominent place easily accessible to the public and clearly designated for that purpose at the principal office of the Board pursuant to the local rules of the Board and the provisions of Chapter 21, Code of Iowa, upon reasonable advance notice to the public and media at least twenty-four hours prior to the commencement of the meeting as required by law and with members of the public present in attendance; I further certify that the individuals named therein were on the date thereof duly and lawfully possessed of their respective offices as indicated therein, that no board vacancy existed except as may be stated in the proceedings, and that no controversy or litigation is pending, prayed or threatened involving the incorporation, organization, existence or boundaries of the School District or the right of the individuals named therein as officers to their respective positions.

WITNESS my hand this _____ day of _____, 2018.

Secretary of the Board of Directors of the
Riceville Community School District

CERTIFICATE OF DEPARTMENT OF MANAGEMENT

I, _____, certify that on the _____ day of _____, 2018, there was filed in the office of the Department of Management a Resolution of the Board of Directors of the Riceville Community School District, in the Counties of Howard and Mitchell, State of Iowa, adopted on December 17, 2018; the Resolution provides for Continued Participation in the Instructional Support Program as provided in Iowa Code sections 257.18 through 257.21.

Dated this _____ day of _____, 2018.

State of Iowa, Department of Management

01539054-1\23213-001

NOTICE OF CONSIDERATION OF PROPOSAL TO CONTINUE
PARTICIPATION IN THE INSTRUCTIONAL SUPPORT PROGRAM FOR
THE RICEVILLE COMMUNITY SCHOOL DISTRICT

Notice is hereby given that the Board of Directors of the Riceville Community School District, in the Counties of Howard and Mitchell, State of Iowa, will hold a hearing upon its Resolution to Consider Continued Participation in the Instructional Support Program. The hearing will be held in the High School Library, 912 Woodland Avenue, Riceville, Iowa 50466, on December 17, 2018, at 7:30 o'clock P.M.

The Board of Directors is considering continued participation in the Instructional Support Program as provided in Iowa Code sections 257.18 through 257.21 for a period of five years, commencing with the fiscal year ending June 30, 2020.

Additional funding for the Instructional Support Program for a budget year will be determined annually by the Board of Directors, and will not exceed ten percent (10%) of the total regular program district cost for the budget year and moneys received under Iowa Code section 257.14 as a budget adjustment for the budget year.

Moneys received by the District for the Instructional Support Program may be used for any general fund purpose.

The Instructional Support Program shall be funded by instructional support state aid and a combination instructional support property tax levied annually upon the taxable property within the School District commencing with the levy of property taxes for collection in the fiscal year ending June 30, 2020, and an instructional support income surtax imposed annually, the percent of income surtax to be determined by the Board for each budget year to be imposed upon the state individual income tax of each individual income taxpayer resident in the School District on December 31, 2019, and each year thereafter.

RICEVILLE COMMUNITY SCHOOL DISTRICT

By: _____
Secretary

NOTICE OF NONDISCRIMINATION

It is the policy of the Riceville Community School District not to discriminate on the basis of race, color, national origin, sex, disability, religion, creed, age (for employment), marital status (for programs), sexual orientation, gender identity and socioeconomic status (for programs) in its educational programs and its employment practices. There is a grievance procedure for processing complaints of discrimination. If you have questions or a grievance related to this policy, please contact the district's Equity Coordinator, Michelle Dohlman, School Counselor, 912 Woodland Avenue, Riceville, IA 50466, (641) 985-2288, michelle.dohlman@riceville.k12.ia.us. For further guidance, visit the Iowa Department of Education website.

Approved: February 13, 2013

Reviewed: November 19, 2018

Revised: _____

**Riceville Community School District
At-Risk and Dropout Prevention Program Resolution
for the 2019-2020 School Year
December 17, 2018**

Board Member _____ moved to approve request to the School Budget Review Committee (SBRC) for Modified Supplemental Amount and Supplemental Aid for the 2019-2020 Dropout Prevention Program in the amount of **\$76,047** for expenditures necessary to implement the 2019-2020 at-risk and dropout prevention program plans as approved by the Riceville CSD school board.

Seconded by _____.

Roll Call: Ayes: _____ Nays: _____

Modified Supplemental Amount

MODIFIED SUPPLEMENTAL AMOUNT

#	Description	Amount
1	District cost per pupil	\$6,736
2	Certified enrollment (October 1, current school year) Certified enrollment was found and certified on 10/31/2018 11:48:00 AM.	313.60
3	Maximum modified supplemental amount possible (0.036 x line 1 x line 2)	\$76,047
4	Previous FY Carry-forward from CAR Project 1116 Carry-forward: \$0 Project 1119 Carry-forward: \$0	\$0
5	Requested modified supplemental amount Enter an amount equal to, or less than (Ln3 - Ln4): \$76,047	<div>\$76,047</div>
"Requested MSA and required match (and the associated spending authority) is solely for the purpose of implementing the district's board-adopted Risk/ Dropout program."		

Questions?

If you have questions regarding the service section

Contact: Steve Crew | Steve.Crew@iowa.gov | 515-326-1029

If you have questions regarding the District Budget section (or service budgets),

Contact: Rob Olsen | rob.olsen@iowa.gov | 515-281-4743